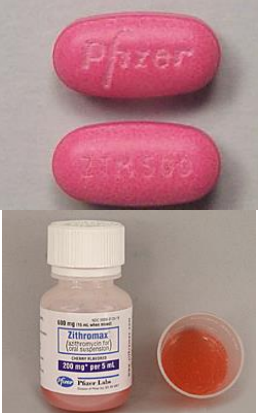


# Azithromycin

## Overview

<i>Indication</i>	<i>MOA</i>	<i>Common Side Effects (&gt;3% reported frequency)</i>	<i>Warnings/Precautions</i>	<i>Counseling Points</i>
- Add on therapy to reduce asthma exacerbations	Modulation of cytokine production	<ul style="list-style-type: none"> <li>- CVS: QTc prolongation and ventricular arrhythmias</li> <li>- Hearing disturbances including hearing loss, deafness, and/or tinnitus</li> <li>- Hepatic Impairment, cholestatic jaundice, hepatic failure/necrosis, hepatitis</li> <li>- Derm: pruritus, rash, SJS</li> <li>- GI: abdominal pain, diarrhea</li> </ul>	<ul style="list-style-type: none"> <li>- Consider checking sputum for atypical mycobacteria, EKG for long QTc</li> <li>- Potential for antibiotic resistance</li> </ul>	

## Available Medication

Name (Brand)	Dosage Forms	Product Images	FDA-Approved Indicated Age	Dosage Strengths
Azithromycin	Tablet, oral suspension, IV		5+ yrs	Tablet: 250 mg, 500 mg Oral suspension: 100mg/5ml, 200mg/5mL IV solution: 500 mg vials

## Dosing

Name (Brand)	Dosage Forms	Dosing	Max Daily Dose	Clinical Pearl
<b>Azithromycin (ZITHROMAX)</b>	Tablet, oral suspension, IV	<p>Children <math>\geq 5</math> years and Adolescents <math>\leq 15</math> years: <b>Note:</b> Fixed (weight-band) dosing based on a target dose of 10 mg/kg/dose 3 times weekly</p> <p>&lt;20 kg: Oral: 125 mg 3 times weekly            20 to 30 kg: Oral: 250 mg 3 times weekly            &gt;30 to 40 kg: Oral: 375 mg 3 times weekly            &gt;40 kg: Oral: 500 mg 3 times weekly</p>	500 mg PO 3 times weekly	Add- on azithromycin can be considered after pulmonary specialist referral for patients with persistent symptomatic asthma despite high-dose ICs/LABA. Treatment for at least 6 months is suggested, as a clear benefit was not seen by 3 months in the clinical trials.